

~~SECRET~~  
Classification

REPORTS INVENTORY						CONTROL NO.			
PREPARE IN DUPLICATE						DDS/OF-177			
1. TITLE OF REPORT (If a fill-in report include Form No.) Account No. 1475, Office Imprest Funds						2. TYPE OF REPORT			
						<input checked="" type="checkbox"/> STATISTICAL <input type="checkbox"/> NARRATIVE <input type="checkbox"/> MACHINE-NAME LISTING			
3. FUNCTIONAL AREA	PERSONNEL		TRAINING		ADMIN. GENERAL OTHER (specify)				
	LOGISTICS		SECURITY						
	MEDICAL		FINANCE						
4. NO. OF COPIES PREPARED	5. FREQUENCY (weekly, monthly, quarterly, etc.)  Monthly				6. DISTRIBUTION (No. of components not number of copies)  48				
7. FORMAT (memorandum, form computer print-out, etc.) Machine Listing		8. ADP PROCESSING		9. DIRECTIVE AUTHORITY REQUIRING REPORT					
		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		IF YES GIVE ADP PROCESSING NO. Job: 212, Prog: A-5-N					
10. PREPARING COMPONENT (include lowest level contributing information to report)  Accounts				11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)					
12. COST FACTORS									
A. MANUAL PREPARATION AND REVIEW COSTS									
GRADE	HOURLY RATE	<input checked="" type="checkbox"/>	HOURS PER REPORT	=	COST PER REPORT	<input checked="" type="checkbox"/>	TIMES PREPARED = COST PER YEAR		
Pro rata share of review, analysis and distribution time.						\$104.84			
B. COSTS OF COMPUTER PRODUCED REPORTS									
120 pgs. x 4 cys. = 480 pgs.		x 3¢ = \$14.40		x 12 times =		\$172.80			
TOTAL COSTS PER YEAR						<del>\$XXX.XX</del> \$ 277.64			
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.									
14. FUTURE GOALS									
GOAL PROPOSED BY COMPONENT FOR THIS REPORT <input type="checkbox"/> RETAIN AS IS <input type="checkbox"/> OTHER (explain) <input type="checkbox"/> CHANGE <input type="checkbox"/> DISCONTINUE						ESTIMATED SAVINGS			
						MAN-HOURS		DOLLARS	
16. DATE OF INVENTORY		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION					18. EXTENSION		